PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees recifications. m

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying				
The Ma					papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
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STAAS & HALS		1 / D	<i> b B00</i>	I here	Cert	tificate	of Mailing or Trans	mission g deposited with the United	
SUITE 700	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
1201 NEW YORK AVENUE, N.W.					transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON, DC 20005 04/08/2008 SDIRETA2 00000022 10627727					(Depositor's name)				
4/08/2008 SPIREINE VV								(Signature)	
1 FC:1501 1440.00 DP 2 FC:1504 300.00 DP						-		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
10/627,727	07/28/2003		Kazunori Inoue				1082.1061	7084	
TITLE OF INVENTION:	GAS DISCHARGE PA	NEL SUBSTRATE	ASSEMBLY, PROI	DUCT	ION METHOD	THERE	FOR AND AC TY	YPE GAS	
DISCHARGE PANEL	- GAS DISCHARGE	E PANEL SUBS	STRATE ASSEMI	317	HAVING PRO	TECTI	JE LOYER IN C	OUTACT WITH	
DISCHARGE S	SPACE AND ACT	YPE CAS DISC	HARGE PANEL	HA	ING THE AS	SCEMI	3LY		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D		PREV. PAID ISSUE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300		\$0		\$1740	04/10/2008	
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS	;]					
PATEL,	VIP	2879	313-586000	ب					
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on				. STAAS	& HALSEY LLP	
CFR 1.363).			(1) the names of t	up to	3 registered paten	t attom	eys 1 CTILIO	<u> </u>	
Change of correspon Address form PTO/SB/1	dence address (or Change 122) attached.	of Correspondence	or agents OR, alter			membe	era 2		
"Fee Address" indica	ation (or "Fee Address" Inc or more recent) attached.	lication form Use of a Customer	registered attorney			single firm (having as a member a by or agent) and the names of up to at attorneys or agents. If no name is sill be printed.			
2 ASSIGNEE NAME AND	D RESIDENCE DATA TO	BE PRINTED ON	THE PATENT (print of	or typ	e)			· · ·	
PLEASE NOTE: Unles recordation as set forth	ss an assignee is identified in 37 CFR 3.11. Completi	l below, no assignee on of this form is NC	data will appear on to T a substitute for filin	the pa	tent. If an assign issignment.	ee is id	entified below, the	document has been filed for	
(A) NAME OF ASSIGN	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
PÚJITSU LIM			KAWASAI	ΚΙ,	JAPAN				
FUJITSU HIT	ACHI PLASMA	DISPLAY L	IMITED		KAWASAI				
Please check the appropria	te assignee category or cat	egories (will not be p	rinted on the patent):		Individual 🛣 C	orporati	on or other private g	roup entity Government	
4a. The following fee(s) are	<u> </u>		b. Payment of Fee(s):		se first reapply a	ny prev	iously paid issue fee	e shown above)	
A Issue Fee			A check is enclosed.						
Publication Fee (No	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3935 (enclose an extra copy of this form).								
5. Change in Entity Statu	s (from status indicated ab	ove)						CED 1 27(~)/2)	
a. Applicant claims	SMALL ENTITY status. S	See 37 CFR 1.27.					ITTY status. See 37 (
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if require cords of the United States	d) will not be accept Patent and Trademar	ed from anyone other to k Office.	than t	he applicant; a reg	nstered	attomey or agent; or	the assignee or other party in	
Authorized Signature	MIR.	From			Date O	m'	35,230	5	
Typed or printed name PAUL I. KRAVETZ			·						
an application. Confident submitting the completed this form and/or suggestio Box 1450, Alexandria, Vi Alexandria Virginia 2231	ality is governed by 35 U. application form to the U. ons for reducing this burder regimia 22313-1450. DO N T.1450	S.C. 122 and 37 CFF SPTO. Time will var n, should be sent to t OT SEND FEES OR	y depending upon the he Chief Information COMPLETED FOR	indiv Office MS To	ridual case. Any c er, U.S. Patent and O THIS ADDRES	ommen I Trader S. SEN	ts on the amount of	nd by the USPTO to process ling gathering, preparing, and time you require to complet partment of Commerce, P.O. or for Patents, P.O. Box 1450	